

L18000246761

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

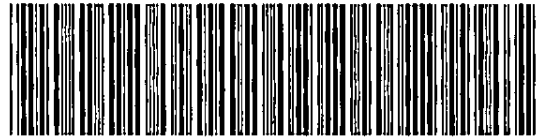
(Document Number)

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MAR 12-2019

FILED  
10 MAR -1 AM 5:10  
19 MAR -1 AM 5:10  
19 MAR -1 AM 5:10

less/Resign  
member

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Penelope & Anatole LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Clifford Friedland  
Name of Person

Penelope & Anatole LLC  
Firm/Company

Attn: Clifford Friedland, Suite 204, 1451 Cypress Creek Road  
Address

Fort Lauderdale, FL 33309  
City/State and Zip Code

springboardaigen@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Clifford Friedland at ( 786 ) 586-4545  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☐ \$25 Filing Fee

☒ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Penelope & Anatole LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L18000246761

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 02/03/2019

4. I, Penelope Friedland, hereby withdraw/resign as a  
(Print Name of Person Resigning)

Member AMBR  
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Penelope Friedland  
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

FILED  
19 MAR -1 AM 5:18  
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